



PTO/SB/01 (10-01)  
Approved for use through 10/31/2002. OMB 0651-0032  
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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number LE DS.00111

First Named Inventor Gaston, Ian D.

**COMPLETE IF KNOWN**

Application Number 10/691261

Filing Date 10/22/2003

Art Unit Unknown

Examiner Name Unknown

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**A Method for Standardizing Reporting of Issues, Assumptions, and Risks for a Risk Review Board**

*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/22/2003 as United States Application Number or PCT International

Application Number 10/691261 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
|                                     |         |                                  |                          | YES                      | NO                       |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☒ Customer Number **38851** OR ☐ Correspondence address below

Stephen R. Loe

Name

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Address

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City

TX

State

75034

ZIP

USA

Country

(972) 712-4881

Telephone

(972) 712-4882

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventorGiven Name Ian D.  
(first and middle [if any])Family Name Gaston  
or SurnameInventor's  
Signature

Date 15 DEC 03.

Telford

Residence: City

Shropshire

State

UK

Country

UK

Citizenship

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Aqueduct

Telford

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Shropshire

State

TF4 3RA

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UK

Country

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name Phil  
(first and middle [if any])Family Name Wolstenholme  
or SurnameInventor's  
Signature

Date 15/12/03

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Mailing Address 20 Majestic Way  
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Country

☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



PTO/SB/81 (06-03)  
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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

|                        |  |
|------------------------|--|
| Application Number     | 10/691261  |
| Filing Date            | October 29, 2003   |
| First Named Inventor   | Ian D. Gaston  |
| Title                  | A Method for Standardizing Reporting of Issues, Assumpti |
| Art Unit               | Unknown  |
| Examiner Name          | Unknown  |
| Attorney Docket Number | LEDS.00111   |

I hereby appoint:

☐ Practitioners at Customer Number:

OR

☒ Practitioner(s) named below:

| Name                  | Registration Number |
|-----------------------|---------------------|
| Stephen R. Loe        | 43,757              |
| Allen Scott Lineberry | 44,873              |
|                       |                     |
|                       |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

☐ The address associated with Customer Number:

OR

|   |                                  |       |                |     |       |
|---|----------------------------------|-------|----------------|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Stephen R. Loe                   |       |                |     |       |
| Address   | The Law Office of Stephen R. Loe |       |                |     |       |
| Address   | P.O. Box 649                     |       |                |     |       |
| City  | Frisco                           | State | Texas          | Zip | 75034 |
| Country   | U.S.A.                           |       |                |     |       |
| Telephone   | (972) 712-4881                   | Fax   | (972) 712-4882 |     |       |

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

|           |               |           |                 |
|-----------|---------------|-----------|-----------------|
| Name      | Ian D. Gaston |           |                 |
| Signature |               |           |                 |
| Date      | 15 DEC 03.    | Telephone | +44 1952 273899 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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OR

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| Allen Scott Lineberry | 44,873              |
|                       |                     |
|                       |                     |

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☐ The address associated with Customer Number.

OR

|   |                                  |       |                |     |       |
|---|----------------------------------|-------|----------------|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Stephen R. Loe                   |       |                |     |       |
| Address   | The Law Office of Stephen R. Loe |       |                |     |       |
| Address   | P.O. Box 649                     |       |                |     |       |
| City  | Frisco                           | State | Texas          | Zip | 75034 |
| Country   | U.S.A.                           |       |                |     |       |
| Telephone   | (972) 712-4881                   | Fax   | (972) 712-4882 |     |       |

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

|           |                   |           |                 |
|-----------|-------------------|-----------|-----------------|
| Name      | Phil Wolstenholme |           |                 |
| Signature |                   |           |                 |
| Date      | 12/12/03          | Telephone | +44 1952 295724 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted.

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